

USM 285 is a 5 part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America		COURT CASE NUMBER 16-00266
DEFENDANT JENNIFER L. FRANKLIN & JEFFREY M. FRANKLIN		TYPE OF PROCESS HANDBILL <i>Hand</i>
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN JENNIFER L. FRANKLIN	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP code) 40 Chestnut Street Tunkhannock, PA 18657	
SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285
KML Law Group, P.C. 701 Market Suite 5000 Philadelphia, PA 19106		Number of parties to be served in this case
		Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers and Estimated Times Available for Service)

Minimum Bid: \$34,234.00

Signature of Attorney other Originator requesting service behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 215-627-1322	DATE 7/29/16
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY--DO NOT WRITE BELOW THIS LINE			

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 67	District to Serve No. 67	Signature of Authorized USM's Deputy or Clerk <i>[Signature]</i>	Date 11/8/2016
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address entered below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (complete only, different than shown above)	Date 11/17/16	Time 1100 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy <i>[Signature]</i>		

Service Fee \$195.00	Total Mileage Charges (including out-of-pocket) \$25.87	Forwarding Fee	Total Charges \$220.87	Advance Deposit	Amount owed to U.S. Marshals Service (Amount of Payment) \$0.00
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REMARKS: 11/17/16 - (3) HOURS - (1) DUSM - \$195.00, TOTAL MILEAGE 47.9 - \$25.87
PROPERTY SOLD

PRINT 5 COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal
5. ACKNOWLEDGMENT OF RECEIPT

FILED
SCRANTON

DEC 06 2016

Form USM-285
Rev. 12-90

PER *[Signature]*
DEPUTY CLERK